

## DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



June 7, 1979

ALL-COUNTY LETTER NO. 79-34

TO: ALL-COUNTY WELFARE DIRECTORS

SUBJECT: STATISTICAL REPORTING OF EMERGENCY LOANS

REFERENCE: ALL-COUNTY LETTER NO. 79-11

This All-County Letter is being issued to require the counties to footnote the ABD 215 (Emergency Loans - Monthly Statistical Report) form in such a way as to indicate: 1) the dollar amount of credit used if the dollar amount reported in line item 5, column (2), has been reduced due to outstanding credit amounts; and, 2) the dollar amount of credit remaining. If no credit has been used or established, please indicate a "0" in the footnotes.


Subsequent to the revision of the ABD 215 with All-County Letter No. 79-11, dated February 21, 1979, some counties were concerned because they were unable to report recipient repayments on previously defaulted loans. These credit amounts are established when a recipient repays on a defaulted loan that has previously been repaid through State reimbursement. Additionally, the footnoted data will enable the Statistical Services Bureau to properly review the ABD 215 report.

Two examples are contained in the instructions that clarify the reporting method to be used in cases where the County has established outstanding credit amounts. In cases where established credit amounts have been applied toward the amount submitted to the State for reimbursement, the summation instructions noted in All-County Letter No. 79-11 under item 6, will not apply.

These footnotes are required effective with the June 1979 report month. They will be incorporated into a revised form should recipient repayments on defaulted loans continue in a large amount. If this is not the case, these footnotes will be discontinued with the November 1979 report month.

The footnotes are to be located at the bottom of Form ABD 215. Attached is a copy of Form ABD 215 with the proper placement of the required footnotes. Should you have any questions regarding this reporting requirement, please contact the Statistical Services Bureau at (916) 322-5462.

Sincerely,



R. E. REICH  
Deputy Director  
Administration Division

Attachment

cc: CWDA

Send one copy (by the 20th of each month) to:

**EMERGENCY LOANS —  
MONTHLY STATISTICAL REPORT**Department of Social Services  
Statistical Services Bureau  
744 P Street, Mail Station 12-81  
Sacramento, CA 95814

County		Month
ITEM	NUMBER (1)	AMOUNT (2)
1. Loans approved this month (sum of a + b, below) .....	*	\$
a. SSI/SSP Loans .....		
b. RSDHI Loans .....		
2. Loans denied this month .....		XXX
3. Detail of loans approved this month:	<div style="display: flex; justify-content: space-between;"> <div>SSI/SSP</div> <div>RSDHI</div> </div>	
a. ....		\$ 0 — 50
b. ....		51 — 100
c. ....		101 — 150
d. ....		151 — 200
e. ....		201 — 250
* Must equal the sum of Items 3a-3e		
4. Loan repayments during the month, total (sum of a + b, below) .....		
a. Loans fully repaid (sum of (1) + (2), below) .....		
(1) By recipients .....		
(2) State reimbursement (sum of (a) + (b), below) .....		
(a) SSI/SSP Loans .....		
(b) RSDHI Loans .....		
b. Loans partially repaid .....		
5. Loans submitted to State for reimbursement this month (sum of a + b, below) .....		
a. SSI/SSP Loans .....		
b. RSDHI Loans .....		
6. Loan balances outstanding, end of month:		
TOTAL (sum of 6a through 6c, below) .....		
a. Less than 30 days .....		
b. 30 — 59 days .....		
c. 60 days or more .....		
7. Loans referred to district attorney during month .....		
PERSON TO CONTACT REGARDING THIS FORM		DATE
TELEPHONE		